

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m. G</i>		3/2/00
O.I.P.E. CLASSIFIER	<i>nm</i>	32	3/9
FORMALITY REVIEW		67503	4-20-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 " Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
11	5/16/03
12	5/16/03
13	5/16/03
14	5/16/03
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50	5/16/03

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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